

What is an umbilical hernia?

A sac pushes through an opening under the skin at the navel or belly button area (umbilicus). The sac often has fluid. Sometimes intestine may be in the sack too.

What causes it?

This hernia is present at birth. It happens because the muscles have not completely closed around the belly button.

Many umbilical hernias will close in the first 3 years of life. As a child begins to crawl and walk, the muscles around the belly button will come together. The hernia may get smaller or close completely. **Do not tape or bind the stomach. Do not try to tape something on the hernia to push it in.** Doing this may hurt your child.

How does it affect my child?

The hernia may be present all the time. Some umbilical hernias get larger when your child cries or strains. The hernia normally does not cause pain.

When Should My Child Have Surgery?

For young children who are not having pain or problems we suggest families can wait for surgery until the child is at least 3 years old. This gives the hernia time to get better on its own and avoid surgery. If the hernia does not fix on its own by 3 years of age, it probably won't. It could cause problems later in life. When surgery is needed, it is important that this be performed at a hospital like Children's Wisconsin. Here there are pediatric surgeons, pediatric anesthesiologists and pediatric nurses. They make doing surgery and anesthesia in young children safer.

What is done during surgery to repair the hernia?

In children, the repair is most often done with just stitches made on the inside of the body. This is done through a small incision or cut around the belly button. This is a very different surgery than how it is done for adults. Hernias almost never come back after they are fixed in children. Adults need a different way to fix it and often have it return. **If your child has surgery, they will go home the same day.**

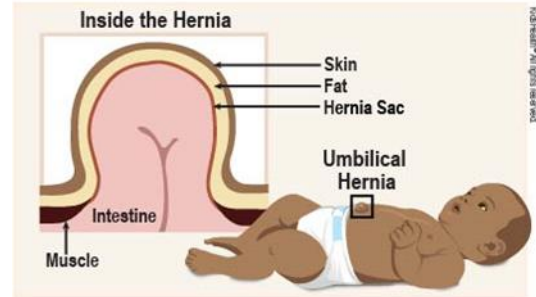
How do I prepare my child for surgery?

At a pre-surgery appointment you will be get instructions to get ready for the surgery. Follow the instructions. If you do not get this information, ask your doctor or nurse for them.

Your child should not eat or drink before the surgery. This is very important. If your child eats or drinks, the surgery must be delayed or cancelled. I

Call you doctor if your child has one or both of the problems listed below within two days (48 hours) before the surgery:

- A temperature over 101°F (38.5°C).
- A cold that includes coughing and/or a runny nose.



What can I expect after surgery?

Most children can go home after surgery. Before going home, your child will need to:

- Take enough fluids.
- Feel comfortable or be easily comforted.

The nurses will use a monitor to check your child's breathing. They will help your child with pain medicines and starting to eat and drink. The medical team will make sure your child is comfortable and ready for home. The surgeon and anesthesiologist will talk about this with you.

As you get ready to leave the hospital after surgery your child will get an After Visit Summary (AVS). The AVS will have the information to help you care for your child at home. It will also tell you about medicines to take or reasons to call the doctor.

Most children will be feeling good after a few days at home. You will see your surgeon for follow up about a month after surgery. We can often do this follow-up using a virtual video visit. We use the Children's Wisconsin MyChart App for this option.

Resources:

- <https://childrenswi.org/patients-and-families/milwaukee-campus/guide-to-surgery/preparing-for-surgery> Guide to preparing for surgery.
- www.childrenswi.org/learn Preparing for Surgery videos and resources.

ALERT: Call your child's doctor, nurse, or clinic if you have any questions or concerns or if your child has:

- A hernia that gets hard or tender, or it does not go back in when your child relaxes.
- Pain or is throwing up.
- Special health care needs that were not covered by this information.

This sheet was created to help you care for your child or family member. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment and follow-up.